

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	SF		10-15-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	SW	32	10/25
FORMALITY REVIEW	MS	842	11/13/01
RESPONSE FORMALITY REVIEW	pm	927	03/19/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

(1 FET INSIDE)

TAR 1005  
 2/19/02